



23935 240824

Name	: MR. ABHINAV GUPTA	Registration ID	: 23935	Sample Collection	: 24/08/2024 10:14:44
Age/Sex	: 36 Yrs. / M	Printed	: 26/08/2024 14:52:50	Sample Received	: 24/08/2024 10:14:44
Ref. By	: UNION BANK OF INDIA	Sent By	: Arcofemi Healthcare Pvt Ltd	Report Released	: 24/08/2024 15:09:13

**COMPLETE BLOOD COUNT**

Test	Result	Unit	Biological Ref Range
Hemoglobin (SLS) Photometric	: 13.7	g/dL	13-18 g/dL
Total RBC (Electrical Impedence)	: 4.67	10 <sup>6</sup> /μL	3.0-6.0 10 <sup>6</sup> /μL
Hematocrit (PCV) (Calculated)	: 43.2	%	36-54 %
Mean Corpuscular Volume (MCV) (calulated)	: 92.5	fL	78-101 fL
Mean Corpuscular Hemoglobin (MCH) (Calculated)	: 29.3	pg	27-32 pg
Mean Corpuscular Hemoglobin Concentration (MCHC) (Calculated)	: 31.7	g/dL	31.5-34.5 g/dL
Red Cell Distribution Width (RDW- CV) (Electrical Impedence)	: 12.30	%	12-15 %
Total Leucocytes Count (Light Scattering)	: 5800	/cumm	4000-11000 /cumm
<b>Neutrophils</b> (Calculated)	: 56	%	40-75 %
<b>Eosinophils Percentage</b> (Calculated)	: 02	%	1-6 %
Lymphocyte Percentage (Calculated)	: 36	%	20-45 %
Basophils Percentage (Calculated)	: 0	%	0-1 %
Monocytes Percentage (Calculated)	: 06	%	1-10 %
RBC Morphology	: Normocytic, Normochromic		
WBC Morphology	: Normal Morphology		
Platelet Count (Electrical Impedence)	: 267000	/ul	150000-450000 /ul
Platelets on Smear	: Adequate		Adequate
E.S.R	: 06	mm at 1hr	0-20 mm at 1hr

Sample Type: EDTA whole blood (Westergren)

Sample Type : EDTA Whole Blood

Test done with THREE PART CELL COUNTER (Sysmex KX-21)

\*All Samples Processed At Excellas Clinics Mulund Centre .

\*ESR NOT IN NABL scope.

(Collected At: 24/08/2024 10:14:44, Received At: 24/08/2024 10:14:44, Reported At: 24/08/2024 15:09:13)



*Signature*  
**Dr. Santosh Khairnar**  
 M.D. (Pathologist)  
 Reg. No.-2000/08/2926





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----- End Of Report -----



*Santosh Khairnar*  
**Dr. Santosh Khairnar**  
M.D. (Pathologist)  
Reg. No.-2000/08/2926





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Sent By	: Arcofemi Healthcare Pvt Ltd		

### HbA1c (Whole Blood)

Test	Result	Unit	Reference Range
HbA1c-Glycosylated Haemoglobin	: 5.80	%	Non-diabetic: 4-6 Excellent Control: 6-7 Fair to good control: 7-8 Unsatisfactory control: 8-10 Poor Control: >10

EDTA Whole Blood, Method: HPLC

Estimated Average Glucose (eAG)	: 119.76	mg/dl	65.1-136.3 mg/dL mg/dl
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EDTA Whole Blood, Method: Calculated

**Interpretation:**

- 1.The term HbA1c refers to Glycated Haemoglobin. Measuring HbA1c gives an overall picture of what the average blood sugar levels have been over a period of weeks/month. Higher the HbA1c, the greater the risk of developing diabetes-related complications.
- 2.HbA1c has been endorsed by clinical groups and ADA (American Diabetes Association) guidelines 2012, for the diagnosis of diabetes using a cut-off point of 6.5%. ADA defined biological reference range for HbA1c is between 4-6%. Patients with HbA1c value between 6.0-6.5% are considered at risk for developing diabetes in the future. Trends in HbA1c area a better indicator of glucose control than standalone test.
- 3.To estimate the eAG from the HbA1c value, the following equation is used:  $eAG(mg/dl) = 28.7 * A1c - 46.7$ .
- 4.Diabetic must aspire to keep values under 7% to avoid the various complications resulting from diabetes.

\*Note - This test is outsourced and processed at Millenium Special Labs Pvt Ltd.

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### Blood Sugar Fasting (FBS) & Post Prandial Blood Sugar (PPBS)

Test	Result	Unit	Biological Ref. Range
GLUCOSE (SUGAR) FASTING, (Fluoride Plasma Used)	: 101	mg/dL	Non-Diabetic: < 100 mg/dl Impaired Fasting Glucose: 100-125 mg/dl Diabetic: $\geq$ 126 mg/dl
GLUCOSE (SUGAR) PP, ( Fluoride Plasma Used )	: 119	mg/dl	Non-Diabetic: < 140 mg/dl Impaired Glucose Tolerance: 140-199 mg/dl Diabetic: $\geq$ 200 mg/dl

Method: GOD-POD

Test Done on - Automated Biochemistry Analyzer (EM 200)

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(Collected At: 24/08/2024 10:14:44, Received At: 24/08/2024 10:14:44, Reported At: 24/08/2024 17:05:24)



*Santosh Khairnar*  
**Dr. Santosh Khairnar**  
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 Reg. No.-2000/08/2926





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**BLOOD GROUP**

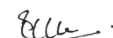
Test	Result	Unit	Biological Ref. Range
Blood Group	: 'A' Rh POSITIVE		

Slide and Tube Agglutination Test

(Collected At: 24/08/2024 10:14:44, Received At: 24/08/2024 10:14:44, Reported At: 24/08/2024 16:18:27)

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**Dr. Santosh Khairnar**  
M.D. (Pathologist)  
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 Age/Sex : 36 Yrs. / M      Printed : 26/08/2024 14:52:50      Report Released : 24/08/2024 15:12:53  
 Ref. By : UNION BANK OF INDIA      Sent By : Arcofemi Healthcare Pvt Ltd

**LIPID PROFILE**

Test	Result	Unit	Biological Ref. Range
Total Cholesterol	: <b>235</b>	mg/dl	Desirable: <200 Borderline high = 200-239 High: > 239
<i>Serum, Method: CHOD-PAP</i>			
S. Triglyceride	: <b>164</b>	mg/dl	Desirable: <161 Borderline High: 161 - 199 High: > 200 - 499/ Very High:>499
<i>Serum, Method: GPO-Trinder</i>			
HDL Cholesterol	: 53	mg/dl	35.3-79.5 mg/dl
<i>serum,Direct method</i>			
LDL Cholesterol	: 149.20	mg/dl	Optimal: <100; Near Optimal: 100-129; Borderline High: 130-159; High: 160-189; Very high: >190
<i>Serum, (Calculated)</i>			
VLDL Cholesterol	: <b>32.8</b>	mg/dl	5-30 mg/dl
<i>Serum, Method: Calculated</i>			
LDL/HDL Ratio	: 2.8		Optimal: <2.5 Near Optimal: 2.5-3.5 High >3.5
<i>Serum, Method: Calculated</i>			
TC/HDL Ratio	: 4.4		Optimal: <3.5 Near Optimal: 3.5 - 5.0 High >5.0
<i>Serum, Method: Calculated</i>			

Test Done on - Automated Biochemistry Analyzer (EM 200).


**Interpretation**

1. Triglycerides: When triglycerides are very high greater than 1000 mg/dL, there is a risk of developing pancreatitis in children and adults. Triglycerides change dramatically in response to meals, increasing as much as 5 to 10 times higher than fasting levels just a few hours after eating. Even fasting levels vary considerably day to day. Therefore, modest changes in fasting triglycerides measured on different days are not considered to be abnormal.
2. HDL-Cholesterol: HDL- C is considered to be beneficial, the so-called "good" cholesterol, because it removes excess cholesterol from tissues and carries it to the liver for disposal.
3. LDL-Cholesterol: Desired goals for LDL-C levels change based on individual risk factors.

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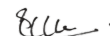
**LIVER FUNCTION TEST**

Test	Result	Unit	Biological Ref. Range
S. Bilirubin (Total) <i>Serum, Method: Diazo (walter &amp; Gerarde)</i>	: 0.43	mg/dl	0-2.0 mg/dl
S. Bilirubin (Direct) <i>Serum, Method: Diazo (walter &amp; Gerarde)</i>	: 0.17	mg/dl	0-0.4 mg/dl
S. Bilirubin (Indirect) <i>Serum, Method: Calculated</i>	: 0.26	mg/dl	0.10-1.0 mg/dl
Aspartate Transaminase (AST/SGOT) <i>Serum, Method: UV Kinetic with P5P</i>	: 27.7	IU/L	0-35 IU/L
Alanine Transaminase (ALT/SGPT) <i>Serum, Method: UV Kinetic with P5P</i>	: 37.5	IU/L	0-45 IU/L
S. Alkaline Phosphatase <i>Serum, Method: IFCC with AMP buffer</i>	: 63.0	IU/L	53-128 IU/L
Total Proteins <i>Serum, Method: Biuret</i>	: 6.2	gm/dl	6.4-8.3 gm/dl
S. Albumin <i>Serum, Method: BCG</i>	: 4.3	gm/dl	3.5-5.2 gm/dl
S. Globulin <i>Serum, Method: Calculated</i>	: 1.9	gm/dl	2.3-3.5 gm/dl
A/G Ratio <i>Serum, Method: Calculated</i>	: 2.26		0.90-2.00
Gamma GT <i>Serum, Method: G glutamyl carboxy nitroanilide</i> <i>Test Done on - Automated Biochemistry Analyzer (EM 200).</i>	: 40	U/L	0-55 U/L

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**BLOOD UREA NITROGEN (BUN)**

Test	Result	Unit	Biological Ref. Range
Urea	: 18.70	mg/dl	19-45 mg/dl

Serum, Method: Urease - GLDH

Blood Urea Nitrogen : 8.74 mg/dl 5-18 mg/dl

Test Done on - Automated Biochemistry Analyzer (EM 200)

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**SERUM CREATININE**

Test	Result	Unit	Biological Ref. Range
S. Creatinine	: 0.97	mg/dl	0.7-1.3 mg/dl

Serum, Method: Enzymatic

Test Done on - Automated Biochemistry Analyzer (EM 200).

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**SERUM URIC ACID**

Test	Result	Unit	Biological Ref. Range
S. Uric Acid	: 4.80	mg/dl	3.5-7.2 mg/dl

Serum, Method: Uricase - POD

Test Done on - Automated Biochemistry Analyzer (EM 200).

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**BUN CREAT RATIO (BCR)**

Test	Result	Unit	Biological Ref. Range
BUN/Creatinine ratio	: 9.00		5-20

Serum, Method: Calculated

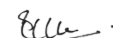
**NOTE:**

A blood urea nitrogen (BUN)/creatinine ratio (BCR) >20 is used to distinguish pre-renal azotemia (PRA) and acute tubular necrosis (ATN)

(Collected At: 24/08/2024 10:14:44, Received At: 24/08/2024 10:14:44, Reported At: 24/08/2024 15:13:37)

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**THYROID FUNCTION TEST**

Test	Result	Unit	Biological Ref. Range
Total T3	: 1.1	ng/dl	0.70-2.04 ng/dl
<i>Serum, Method: CLIA</i>			
Total T4	: 6.16	µg/dl	5.1-14.1 µg/dl
<i>Serum, Method: CLIA</i>			
TSH (Thyroid Stimulating Hormone)	: 1.51	µIU/ml	0.27-5.3 µIU/ml
<i>Serum, Method: CLIA</i>			

Interpretation Decreased TSH with raised or within range T3 and T4 is seen in primary hyperthyroidism, toxic thyroid nodule, sub-clinical hyperthyroidism, on thyroxine ingestion, post-partum and gestational thyrotoxicosis Raised TSH with decreased T3 and T4 is seen in hypothyroidism and with intermittent T4 therapy. Alterations in TSH are also seen in non-thyroidal illnesses like HIV infection, chronic active hepatitis, estrogen producing tumors, pregnancy, new-born, steroids, glucocorticoids and may cause false thyroid levels for thyroid function tests as with increased age, marked variations in thyroid hormones are seen. In pregnancy T3 and T4 levels are raised, hence FT3 and Ft4 is to be done to determine hyper or hypothyroidism.

\*Note - This test is outsourced and processed at Millenium Special Labs Pvt Ltd.

(Collected At: 24/08/2024 10:14:44, Received At: 24/08/2024 10:14:44, Reported At: 24/08/2024 17:34:28)

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**Dr. Santosh Khairnar**  
M.D. (Pathologist)  
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**EXAMINATION OF URINE**


Test	Result	Unit	Biological Ref. Range
<b><u>PHYSICAL EXAMINATION</u></b>			
Quantity :	20	ml	
Colour :	Pale yellow		
Appearance :	Clear		
Reaction (pH) :	5.0		4.5 - 8.0
Specific Gravity :	1.005		1.010 - 1.030
<b><u>CHEMICAL EXAMINATION</u></b>			
Protein :	Absent		Absent
Glucose :	Absent		Absent
Ketones Bodies :	Absent		Absent
Occult Blood :	Absent		Absent
Bilirubin :	Absent		Absent
Urobilinogen :	Absent		Normal
<b><u>MICROSCOPIC EXAMINATION</u></b>			
Epithelial Cells :	0 - 1	/ hpf	
Pus cells :	0 - 1	/ hpf	
Red Blood Cells :	Absent	/ hpf	
Casts :	Absent	/ lpf	Absent / lpf
Crystals :	Absent		Absent
<b><u>OTHER FINDINGS</u></b>			
Yeast Cells :	Absent		Absent
Bacteria :	Absent		Absent
Mucus Threads :	Absent		
Spermatozoa :	Absent		
Deposit :	Absent		Absent
Amorphous Deposits :	Absent		Absent

sample type:Urine

Method:Visual and Microscopic

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**X RAY CHEST PA VIEW**

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Both the lung fields appear normal.

Cardiac silhouette is within normal limits.

Bilateral hilar shadows appear normal.

Bilateral costophrenic angles appear normal.

Bony thorax appears normal.

Soft tissues appear normal.

**IMPRESSION:**

**No significant abnormality detected.**



**Dr. Reshma Gokran**  
MD (Radiologist)  
Reg. No-2009/09/3296





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Ref. By : UNION BANK OF INDIA

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MR. ABHINAV GUPTA AGE:-36YRS/MALE R57 CHEST PA 24-Aug-24 11:43 AM

EXCELLAS CLINICS PVT LTD TEL:-022-25695661/71





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**Dr. Reshma Gokran**  
MD (Radiologist)  
Reg. No-2009/09/3296





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**OPHTHALMIC EVALUATION**

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<b>Examination</b>	<b>Right Eye</b>	<b>Left Eye</b>
Distance Vision	6/6	6/6
Near Vision	N/6	N/6
Color Vision	Normal	
Remarks	Normal	

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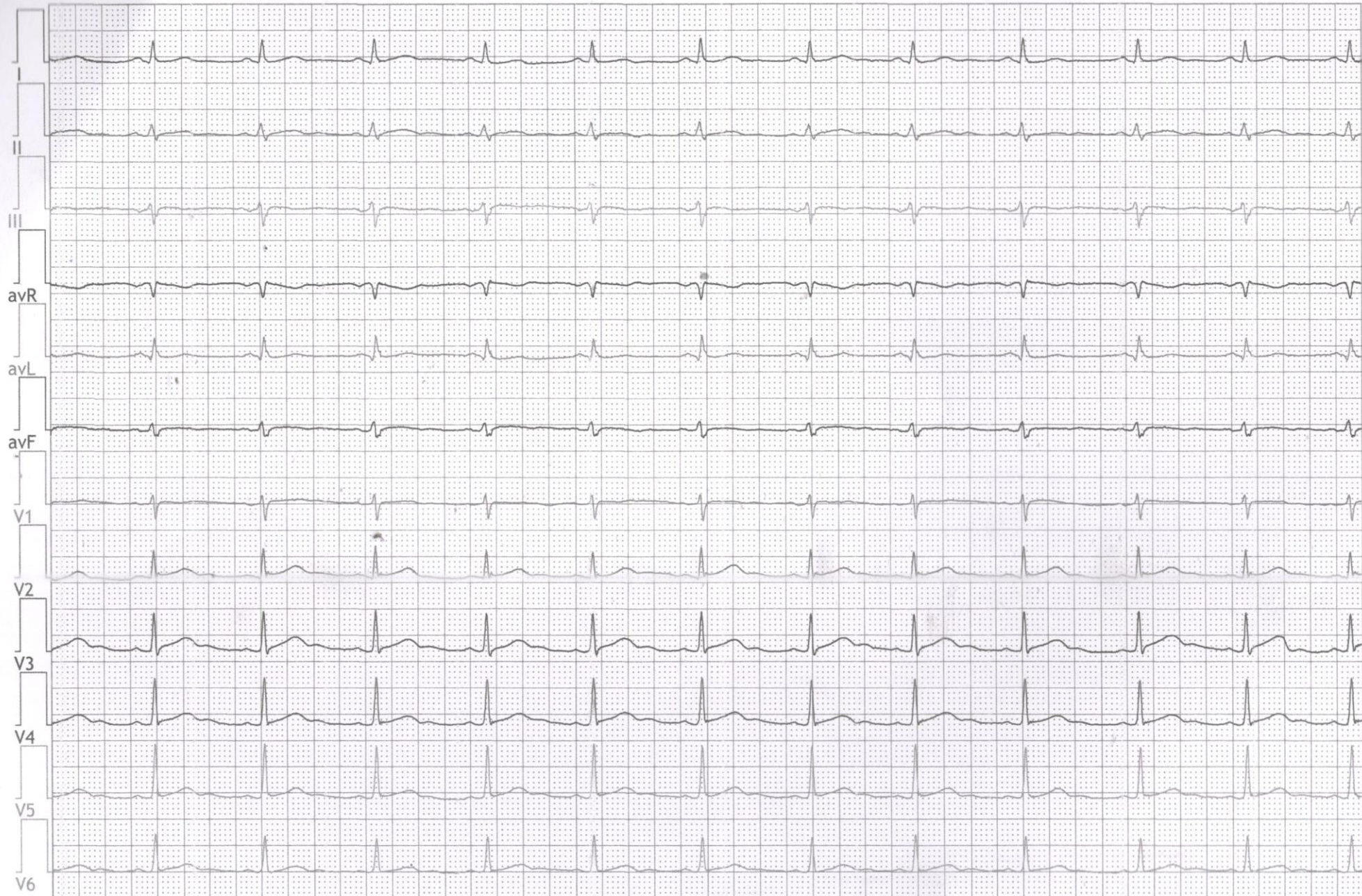
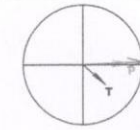


**MEDICAL EXAMINATION REPORT**

Name	Mr./Mrs./ Miss	Abhinav	
Sex		Male/ Female	
Age (yrs.)	36	UHID :	
Date		24 / 08 / 2024	Bill No. :
Marital Status		Married/ No. of Children / Unmarried/ Widow :	
Present Complaints		- <del>No comp</del> do- cough & cold since 1 day	
Past Medical : History Surgical :		- No - No adenoidectomy 5 years back	
Personal History		Diet : Veg <input type="checkbox"/> / Mixed <input checked="" type="checkbox"/> Addiction : Smoking <input checked="" type="checkbox"/> / Tobacco Chewing <input type="checkbox"/> / Alcohol <input type="checkbox"/> <sup>occasionally</sup> Any Other <sup>occasionally</sup> since 4 years	
Family History	Father = Mother = Siblings =	HT / DM / IHD / Stroke / Any Other <sup>NO</sup> Mother = HT / DM / IHD / Stroke / Any Other Siblings = HT / DM / IHD / Stroke / Any Other - No	
History of Allergies		Drug Allergy <sup>NO</sup> → No Any Other → Allergy to dust & climate change	
History of Medication		For HT / DM / IHD / Hypothyroidism <sup>NO</sup> Any Other	
On Examination (O/E)		G. E. : R. S. : C. V. S. : C.N.S. : P/A : Any Other Positive Findings : <sup>NO</sup>	

Height	171 cms	Weight	72.3 Kgs
BMI	24.7		
Pulse (per min.)	78/min	Blood Pressure (mm of Hg)	110/70 mm of Hg
SPO2 - 98% on Rn		Gynaecology	
Examined by	Dr.		
Complaint & Duration			
Other symptoms (Mict, bowels etc)			
Menstrual History	Menarche _____ Cycle _____ Loss _____ Pain _____ I.M.B. _____ P.C.B. _____ L.M.P. _____ Vaginal Discharge _____ Cx. Smear _____ Contraception _____		
Obstetric History			
Examination :			
Breast			
Abdomen			
P.S.			
P.V.			
Gynaecology Impression & Recommendation			
Recommendation	EXCELLAS CLINICS PVT. LTD B-1, Vikas Paradise Commercial, Below Axis Bank, LBS Marg, Near Santoshi Mata Mandir, Mulund (West), Mumbai - 400080.		
Physician Impression			
Examined by :	- Overweight = To Reduce Weight - Underweight = To Increase Weight		





NS Report New clinically correlate